

GUIDANCE ON COMPLETING THE WOUND HEALING REFERRAL FORM

This form is to be used for all Out-Patient and Community wound healing referrals.

Please identify which service you require i.e. either the Professorial Out-Patient Wound Healing Service or the Community Nurse-Led Wound Healing Service. **NB Do not send a referral to more than one service.**

The fax number for each service is clearly visible in the top section of the form so please use the appropriate contact details.

All services offer a full wound healing assessment and will give recommendations for ongoing management of the patient's wound(s).

However, the ongoing responsibility lies with the local clinician undertaking the patient's on-going wound care. If there are any queries about the patient's wound(s) please contact the appropriate person using the contact details on the top of the Wound Healing Referral Form.